

**Application Data Sheet**  
**Application Information**

**Application number::**

**Filing Date::** HEREWITH

**Application Type::** UTILITY

**Subject Matter::**

**Suggested classification::**

**Suggested Group Art Unit::**

**CD-ROM or CD-R?::**

**Number of CD disks::**

**Number of copies of CDs::**

**Sequence submission?::**

**Computer Readable Form (CRF)?::**

**Number of copies of CFR::**

**Title::** SYSTEMS AND METHODS EXTENDING AN  
EXISTING PROGRAMMING LANGUAGE  
WITH CONSTRUCTS

**Attorney Docket Number::** BEAS-01389US2

**Request for Early Publication?::**

**Request for Non-Publication?::**

**Suggested Drawing Figure::** 1

**Total Drawing Sheets::** 3

**Small Entity?::**

**Latin name::**

**Variety denomination name::**

**Petition included?::**

**Petition Type::**

**Licensed US Govt. Agency::**

**Contract or Grant Numbers::**

**Secrecy Order in Parent Appl.?::**

### **Applicant Information**

<b>Applicant Authority Type::</b>	Utility
<b>Primary Citizenship Country::</b>	Hungary
<b>Status::</b>	
<b>Given Name::</b>	Pal
<b>Middle Name::</b>	
<b>Family Name::</b>	Takacsi-Nagy
<b>Name Suffix::</b>	Mr.
<b>City of Residence::</b>	Cupertino
<b>State or Province of Residence::</b>	CA
<b>Country of Residence::</b>	US
<b>Street of mailing address::</b>	10553 Farallone Drive
<b>City of mailing address::</b>	Cupertino
<b>State or Province of mailing address::</b>	CA
<b>Country of mailing address::</b>	US
<b>Postal or Zip Code of mailing address::</b>	95014

### **Correspondence Information**

<b>Correspondence Customer Number::</b>	23910
<b>Phone number::</b>	(415) 362-3800
<b>Fax Number::</b>	(415) 362-2928
<b>Email address::</b>	SRM@fdml.com

## **Representative Information**

**Representative Customer Number::** 23910

## **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
	is an application claiming benefit under 35 UCS 119(e) of	60/450,074	February 25, 2003

## **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

## **Assignee Information**

**Assignee Name::** BEA Systems, Inc.

**Street of mailing address::** 2315 North First Street

**City of mailing address::** San Jose

**State or Province of mailing address::** CA

**Country of mailing address::** US

**Postal or Zip Code of mailing address::** 95131